



Medicare: Today's Issue

June 14, 2004

BETTER BENEFITS – MORE CHOICES

Good News about the Medicare Prescription Drug, Improvement and Modernization Act of 2003!

Reducing Health Disparities

The U.S. Department of Health and Human Services' comprehensive effort to close the health gap among minorities continues to strengthen our nation's health care system.

Closing the Health Gap

- ❖ Part of racial equality is health equality. Scientific evidence shows that minority communities suffer a greater burden of death and disease from many preventable conditions.
- ❖ **Addressing these disparities is a cornerstone of disease prevention.** We must **continue to work together to build longer, healthier lives for all Americans.**
- ❖ Secretary Thompson and HHS will **continue to develop and support innovative approaches to close the health gap in America.**

What the Medicare Modernization Act (MMA) Means for Minority Beneficiaries:

- ❖ The Medicare Prescription Drug, Improvement, and Modernization Act of 2003 (MMA) provides minority beneficiaries with the best possible care, better benefits, greater protections, and more choices.
 - **Immediate Assistance for Prescription Drug Coverage:**
 - Under the Medicare Modernization Act, **7.8 million minority beneficiaries will be provided with access to a prescription drug benefit for the first time in history.** Minority beneficiaries are eligible for **immediate savings** of between 10-25% or more on prescription drugs by participating in the Prescription Drug Card.
 - For the **over 1.5 million low-income minority beneficiaries**, who do not already have drug coverage, the **drug card will give them up to \$600 per year to help them afford their medicines**, in addition to discounts off retail drug prices. That's **nearly \$2 billion in additional help for minority beneficiaries.**
 - **Preventative Benefits & Disease Management:**
 - Beginning in 2005, each year nearly 360,000 newly enrolled **minority Medicare beneficiaries will be covered for an initial physical examination.**
 - Minority Medicare beneficiaries are disproportionately at risk for cardiovascular disease and diabetes compared to all Medicare beneficiaries. **Over 7.8 million minority beneficiaries will be covered for cardiovascular screening blood tests.** This will assist the over 2.7 million minorities with heart disease.
 - Over 2 million minority beneficiaries have diabetes. Nearly a third of those minority beneficiaries have undiagnosed diabetes. **All minority beneficiaries that are at risk for diabetes will be covered for diabetes screening.**
 - These new benefits can be used to screen minority beneficiaries for many illnesses and conditions that, if caught early, can be treated, managed, and can result in far fewer serious health consequences.

- Disease Management is being introduced into the original Medicare program and is a service that already exists in most integrated health plans. These programs **will provide beneficiaries the tools and support systems to help them manage their chronic illnesses** and they are likely to substantially benefit minorities.

Increased HIV/AIDS Funding:

- ❖ President Bush's fiscal year 2005 budget request includes a **6 percent increase in the HIV/AIDS in Minority Communities Fund.**
- ❖ This request is for **\$53 million to support innovative approaches to HIV/AIDS prevention and treatment in minority communities.**

Supporting Research:

- ❖ Last fall, Secretary Thompson announced the **creation of eight Centers for Population Health and Health Disparities, designed to support research to understand and reduce differences in health outcomes, access and care.** These grants total \$60.5 million over five years.
- ❖ The eight centers will **form a network of research teams to explore the complexity of health disparities, following a community-based research approach.** Studies will focus on obesity, cardiovascular disease, breast cancer, prostate cancer, cervical cancer, mental health, gene-environment interactions, psychosocial stress, and other factors.
- ❖ Investigators will follow a **community-based research approach** with populations including low-income whites, African Americans, Hispanics, and the elderly.

Encouraging Preventive Steps:

- ❖ Thousands in minority communities have participated in "Take a Loved One to the Doctor Day" since it was launched in September 2002. This annual event is a **cornerstone of the Department's Closing the Health Gap educational campaign designed to improve health among racial and ethnic minority populations.**
- ❖ For the second year, HHS partnered on Doctor Day with radio personality Tom Joyner and ABC Radio Networks. **Radio Unica, a radio network with significant reach in Hispanic communities, was a new partner this year and provided support through on-air messages and 12 regional health fairs.**
- ❖ **More than 400 national, state and local organizations spanning 50 states partnered with HHS and hosted community events last year.**

Other HHS Initiatives:

- ❖ The National Center on Minority Health and Health Disparities: HHS' National Center on Minority Health and Health Disparities, an arm of the National Institutes of Health (NIH), is the lead federal agency charged with accelerating biomedical research on minority populations. The Center also leads NIH's strategic plan on eliminating health disparities.
- ❖ National Cancer Institute: NIH's National Cancer Institute (NCI) opened the **Center to Reduce Cancer Health Disparities in 2001 to address the unequal burden of cancer in our society.** The center's mission is **to advance understanding of the causes of health disparities, and develop and integrate effective interventions to reduce or eliminate those disparities.**
- ❖ The National Breast and Cervical Cancer Early Detection Program: HHS' National Breast and Cervical Cancer Early Detection Program has **provided more than 3.5 million screening tests for breast and cervical cancer to nearly 1.5 million low-income women.** This program helps to **ensure that underserved women have access to screening services than can detect cancer early and reduce illness and death.**

- ❖ SEER Program: NCI administers the Surveillance, Epidemiology and End Results (SEER) Program for cancer. The SEER Program **gathers cancer incidence and survival data from 12 geographic areas, covering approximately 14 percent of the population.** These population-based data are **a unique and important resource in monitoring stage-related survival of cancers.**